



## Intra-Laboratory Memo

DATE: November 1, 2010

TO: Argonne Employees

FROM: Richard Rons Manager, Employee Benefits

SUBJECT: **OPEN ENROLLMENT FOR 2011**

Open Enrollment for UChicago Argonne, LLC's medical and flexible spending account plans will be held from **Monday, November 1st through Friday, December 3rd**. The effective date for any enrollment or plan change is January 1, 2011. The Open Enrollment period allows you to choose from several medical plans which Argonne makes available to you, add or drop dependents and enroll in flexible spending accounts. Reviewing each plan's options enable you to select the plan which is best suited for you and/or your family.

Due to the Health Care Reform Act, this open enrollment letter will address special notice requirements. Each required notice will be addressed under separate headings in this memo. Key issues in this open enrollment letter are as follows:

- Open Enrollment is extended through Friday, December 3<sup>rd</sup> this year, allowing extra time to make elections. No Open Enrollment changes will be allowed past this date.
- Representatives from the PPO, HMO and Employee Benefits will be available in the Cafeteria lobby November 2, 3 and 4 from 11:30 until 1:30 to answer questions.
- The employee share of the total health care premium will remain at 20%. The Laboratory pays 80% of the premium.
- Argonne's health care plans remain "Grandfathered" under the Health Care Reform Act.
- Our plan covers participants children who are under age 26, with a few exceptions. Student and dependent status are not required.
- Lifetime limits (\$2M overall and infertility diagnosis) on the PPO plan are removed.
- Over the counter drugs and medicines will require a prescription for reimbursement through FSA.
- Benefit information can now be retrieved from home.

### **2011 HEALTH CARE PLAN CONTRIBUTIONS**

(Monthly Contributions include Medical, Dental and Prescription Drug Coverage)

<u>PLAN</u>	<u>SINGLE</u>	<u>Employee PLUS 1</u>	<u>FAMILY</u>
BCBSIL PPO	\$115.00	\$215.00	\$395.00
HMO Illinois	\$ 89.00	\$178.00	\$244.00
BlueAdvantage HMO	\$ 82.00	\$162.00	\$223.00

## ON-LINE ENROLLMENT

As in the past, Open Enrollment elections will be completed on-line at [www.inside.anl.gov](http://www.inside.anl.gov). If you do not have access to a computer, beginning on Monday, November 1st and continuing through Friday, December 3rd, you may make your on-line elections with computers that are available in Human Resources, Room 1K-03, building 201 (located next to Human Resources reception area to the right of the elevators). If needed, a benefit representative will assist you in making your elections on-line.

Please note that when you make your online election for medical coverage and for Health Care or Dependent Care Flexible Spending Accounts, the system will allow you to save your election only after you have acknowledged that you have read, understand and agree to the information provided about your pre-tax salary reductions and rules for making changes during the plan year.

Go to Inside Argonne to access the Open Enrollment web site. Log in under My Argonne using your Argonne domain user ID and password. Click on Benefits, and then Open Enrollment. Instructions on how to use the Open Enrollment website are available through a link on that page. If you need to obtain an ANL domain user ID or if you are unsure of your user ID or password, contact Account Services at 2-9999, menu option 2.

## PLAN ENROLLMENT

- Review the *HEALTH CARE OPTIONS* summary comparison in the Open Enrollment website.
- If you want to participate in flexible spending accounts for 2011, you must enroll. Participation from 2010 does not carry forward into 2011.
- **If you *do not* want to change** your medical plan, you do not need to make a medical plan election. Your present medical plan election will continue in 2011.
- **If you wish to change your medical plan, elect coverage for the first time, add/delete dependents, or cancel coverage**, complete the on-line action by December 3, 2010. If selecting a HMO medical plan you need to complete these two steps in addition to the on-line enrollment:
  - Prior to enrollment, call the physician to verify he/she is accepting new patients and get the 3 digit medical group number.
  - After Open Enrollment, once you receive your new cards, call the medical group to provide your physician's name.

## 2011 PLAN CHANGES AND REQUIRED NOTICES

### Grandfathered Health Plan Notice

Argonne believes our health care plan is a “grandfathered health plan” under the Affordable Care Act. As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that our plan may not include certain consumer protections of

the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to Marge Vaught, ext. 2985 or Kathy Pipal, ext. 2992. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or [www.dol.gov/ebsa/healthreform](http://www.dol.gov/ebsa/healthreform). This Web site has a table summarizing which protections do and do not apply to grandfathered health plans.

### **Special Enrollment Notice for Certain Children Who Aged Out**

Our health care plans will cover children until age 26. During this Open Enrollment you may add your adult children under age 26 who are currently not covered by the plan, including those who lost coverage because of age and those who will first become eligible for plan participation because of the changes to the law.

The definition of dependent for purposes of eligibility for dependent coverage of children is based on the relationship between the child and the participant. In other words, you may add under age 26 children for any reason. Children are no longer required to be financially dependent on the participant, reside with the participant, or be a student. In addition the child can be employed or married (although the child's spouse and/or child would not be eligible for coverage). Because Argonne's plan is grandfathered, the adult child is not eligible for coverage if the child is eligible for employer-based coverage aside from coverage through either parent.

Additional information on dependent coverage is available at: <http://www.dol.gov/ebsa/newsroom/fsdependentcoverage.html>. Frequently asked questions are available at: <http://www.dol.gov/ebsa/faqs/faq-dependentcoverage.html>. Complete eligibility rules for dependents can be found on the benefits portal when you add a dependent, in the benefits section of Inside Argonne, or by clicking on the following link (definition of eligible dependent).

### **Patient Protection Notice**

Employees have the right to select primary care providers, including pediatric care providers, from any provider participating in the plan's network. A referral is not required for obstetrical or gynecological care provided by a physician who is participating in the network. (This is not a change to our plan as the BCBSIL HMOs have allowed direct access to Pediatricians and OB/GYNs. Note: A woman's primary care provider and OB/GYN must be in the same medical group.)

### **Lifetime Limits Notice**

There is no longer a lifetime limit under our PPO plan. This special enrollment period (November 1<sup>st</sup> through December 3<sup>rd</sup>) will allow employees and their eligible dependents that

dropped coverage because they exceeded the lifetime limit under the PPO plan, to now enroll in the plan with an effective date of January 1, 2011.

### **Additional Notices**

Three additional *Notices* are available on-line and are part of the Open Enrollment information:

1. The ***Special Enrollment Requirement*** notice explains when you can enroll or add a dependent without waiting for an Open Enrollment period.
2. The ***Women's Health and Cancer Rights Act of 1998*** notice explains the right of women to reconstructive surgery after a mastectomy has been performed.
3. The **Medicaid and the Children's Health Insurance Program (CHIP)** Notice explains that some States have premium assistance programs that can help employees pay for health care coverage. Information on which States may offer assistance and contact information is in the CHIP Notice.

### **Medical, Dental and Prescription Drug Plan Changes**

Other than the removal of lifetime limits from the PPO and new rates, there are no changes to the medical, dental or prescription drug plans for 2011. A summary comparison (*HEALTH CARE OPTIONS*) of the benefit provisions of each medical plan is provided on-line in the Open Enrollment website.

Although online election changes have to be done through [inside.anl.gov](http://inside.anl.gov), open enrollment and general benefit information can now be retrieved from home. It is available at <http://www.anl.gov/Careers/index.html>, under Working at Argonne, click on Benefits.

Medical providers for the PPO, HMO IL and BlueAdvantage HMO can be found at <http://www.bcbsil.com/providers/index.htm>. Click on Provider Finder, then under Group Products choose PPO, HMO Illinois or BlueAdvantage HMO.

To find a dentist in the Delta Dental Network, go to [www.deltadentalil.com](http://www.deltadentalil.com). Under "Looking for a Dentist?" click on Dental Search. Your choice will be Delta Dental PPO or Delta Dental Premier.

### **Flexible Spending Account Plans (FSA)**

As a result of the Affordable Care Act, effective January 1, 2011, you will need a doctor's prescription to be reimbursed by WageWorks for over-the-counter (OTC) drugs and medicines, such as Claritin, Advil and Robitussin. You will not be able to use your WageWorks card to pay for these purchases. To file a claim, you will need to submit receipts to WageWorks showing the prescription number, or if the number is not on the receipt, include your doctor's prescription. For more information visit the Health Care Card Resource Center on the microsite <http://learnwageworks.com/LearningCenter/documents/OTC-FACT-SHEET.pdf>

FSA participants can access their account usage and balances by going to [www.wageworks.com](http://www.wageworks.com). The 2011 maximum amount you can contribute remains the same: \$5,000 for health care and \$5000 for dependent day care. Please remember to keep all health care FSA receipts as you may

be required to submit them to WageWorks. **Also make sure to re-enroll for 2011 FSA as current elections do not carry forward from year to year!**

A hard copy brochure is being mailed to all employees eligible for participation in the FSA. In addition you should have received a desk drop card that points you to the Wameworks microsite, [FSAworks4me.com/ArgonneNationalLaboratory](http://FSAworks4me.com/ArgonneNationalLaboratory). The microsite contains great information on the tax savings both you and Argonne can achieve by participating in the health and/or dependent day care flexible spending accounts. Using the online savings calculator is the easiest way to estimate FSA expenses and tax savings. The FSA is an IRS approved program that lets you set aside part of your paycheck before Federal, FICA, and most State income taxes are calculated. When you use the online savings calculator, you can enter for a chance to win an iPad from WageWorks. One Argonne employee is guaranteed to win the iPad.

Please read the Flexible Spending Summary Plan Description for details. Federal Law requires that account funds remaining at the end of the Plan Year be forfeited, so contributions to the FSA should be carefully planned.